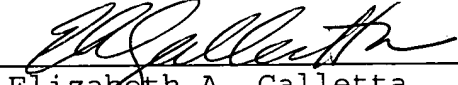


IN THE UNITED STATES PATENT & TRADEMARK OFFICE

In re Application : Henrik Jernstedt, et al.
Serial No. : 10/576,777
Filed : April 21, 2006
For : ANDROGEN RECEPTOR MODULATORS
Examiner :
Attorney Docket : 102870-102
Group Art Unit :
Confirmation No. :
Customer No. : 27267

I hereby certify that this correspondence is being deposited
with the United States Postal Service as First Class Mail in an
envelope addressed to: Commissioner for Patents, P. O. Box 1450,
Alexandria, Virginia 22313-1450 on November 21, 2006.

By 
Elizabeth A. Galletta
Registration No. 52,941
Attorney for Applicants

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

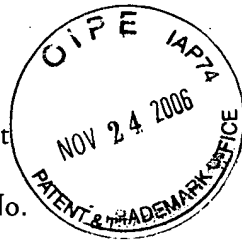
SUPPLEMENTAL PRELIMINARY AMENDMENT

Sir:

Please amend the above-identified Patent Application as
follows:

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application : Henrik Jernstedt, et al.
 Serial No. : 10/576,777
 Filed : April 21, 2006
 For : ANDROGEN RECEPTOR MODULATORS
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CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on November 21, 2006.

By Elizabeth A. Galletta
 Elizabeth A. Galletta
 Registration No. 52,941
 Attorney for Applicants

11/29/2006 GFREY1* *0000054*231865* *10576777*****

01 FC:2615 125.00 DA
 Mail Stop Amendment
 Commissioner for Patents
 P. O. Box 1450
 Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL LETTER

Sir:

Transmitted herewith is an amendment in the above-identified application. The fee has been calculated as shown below:

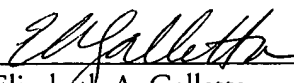
CLAIM AMENDMENT CALCULATION						
Total Claims	Claims Remaining after Amendment	Minus	Highest Number Previously paid for	No. of extra claims present	Rate	Additional Fee
Total Claims	25	-	20	5	x \$50.00	\$250.00
Indep. Claims	3	-	3	0	x \$88.00	\$0.00
Multiple Dependent claims(if any)					x \$300.00	\$0.00
Reduction for Small Entity (50%)						\$125.00
TOTAL FEE						\$125.00

- ☒ No additional fee is required.
- ☐ A check in amount of \$ ____ is attached.
- ☒ Charge \$ 125.00 to Deposit Account No. 23-1665. An additional copy of this transmittal letter is enclosed.
- ☒ Please charge any additional fees or credit overpayment to Deposit Account No. 23-1665.
- ☐ A Petition and Fee for Extension of Time is enclosed.
- ☒ The following additional items are enclosed:
- Substitute Specification with Marked Changes
Substitute Specification – Clean Version
Return Receipt Postcard.

Respectfully submitted,

HENRIK JERNSTEDT, ET AL.

Date: November 21, 2006

By: 
Elizabeth A. Galletta
Registration No. 52,941
Attorney for Applicants

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